

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

SECRETARY OF THE SENATE

15 FEB -5 AM 11:46

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

C H A R L I E H A R D Y F O R U S S E N A T E

ADDRESS (number and street)

P O B O X 1 2 2 2

☒ Check if different
than previously
reported. (ACC)

C H E Y E N N E W Y 8 2 0 0 3 - 1 2 2 2

2. FEC IDENTIFICATION NUMBER ▼

C 0 0 5 5 4 7 5 8

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORT

☐

NEW
(N)

OR

☒

AMENDED
(A)

W Y

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on _____ in the
State of _____

(c) 30-Day POST-Election Report for the:

☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on M M D D Y Y in the
11 04 2014 State of W Y

5. Covering Period

M M
10 16

D D

Y Y
2014

through

M M
11 24

D D

Y Y
2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

CHARLES E HARDY

Signature of Treasurer

Charles E. Hardy

Date

01 27 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
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Only

FEC FORM 3
(Revised 02/2003)